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PTO/SB/31 (02-01)

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NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) 1059-007							
<p>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Assistant Commissioner for Patents, Washington D.C. 20231" on <u>October 1, 2002</u></p> <p></p> <p>Signature _____</p> <p>Typed or printed name <u>James V. Costigan, Esq.</u></p>		<p>In re Application of Barry M. Libin</p> <table border="1"> <tr> <td>Application Number 09/224,781</td> <td>Filed January 4, 1999</td> </tr> <tr> <td colspan="2">For Method for preventing and treating mucosal and dermal conditions</td> </tr> <tr> <td>Group Art Unit 1614</td> <td>Examiner Rose, Shep K</td> </tr> </table>		Application Number 09/224,781	Filed January 4, 1999	For Method for preventing and treating mucosal and dermal conditions		Group Art Unit 1614	Examiner Rose, Shep K
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<p>Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.</p>									
<p>The fee for this Notice of Appeal is (37 CFR 1.17(b))</p>		<p>\$ <u>320.00</u></p>							
<p><input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: <u>\$ 160.00</u></p> <p><input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>08-1540</u>. I have enclosed a duplicate copy of this sheet.</p> <p><input checked="" type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.</p>									
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<p>I am the</p> <p><input type="checkbox"/> applicant/inventor.</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)</p> <p><input type="checkbox"/> attorney or agent of record.</p> <p><input checked="" type="checkbox"/> attorney or agent acting under 37 CFR 1.34(a). <u>25,669</u> Registration number if acting under 37 CFR 1.34(a).</p>									
<p></p> <p>Signature _____</p>		<p>James V. Costigan Typed or printed name</p>							
		<p>October 1, 2002 Date</p>							
<p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.</p>									
<p><input type="checkbox"/> *Total of <u>1</u> forms are submitted.</p>									

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